



IDAHO DEPARTMENT OF
HEALTH & WELFARE

Certified Family Homes (A&D/PCS)– Idaho Medicaid

** Please see separate fee tables for Personal Assistance Agency, Residential Assisted Living Facility, and other Aged and Disabled Waiver service provider rates**

Procedure Code	Modifier	Description	Allowed Amount
S5100		Adult Day Health (1 unit = 15 min)	\$1.50
S5140		Adult Residential Care (1 unit = 1 day)	Participant
T1005		Respite (1 unit = 15 min)	\$2.64
T1013		Oral Interpretation Service (1 unit = 15 min)	\$3.04
T1013	CG	Sign Language Interpretation Service (1 unit = 15 min)	\$12.50
T1019		Personal Care Services (1 unit = 15 min)	\$3.94

If you have any questions regarding these rates please contact Lourie Neal, Office of Reimbursement, Idaho Division of Medicaid, at (208) 287-1162.

Thank you for your continued participation in the Idaho Medicaid Program.